Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Marsha for Senate PO Box 3750 ADDRESS (number and street) (Check if address is changed) **Brentwood** 37024 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS les@leswilliamson.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.marshablackburn.com (Check if address is changed) DATE 05 2023 C00376939 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Williamson, Les, , , Type or Print Name of Treasurer Williamson, Les,,, [Electronically Filed] 07 05 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

E	EC Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	candidate
	Name of Candidate Blackburn, Marsha, , ,	
	Candidate Party Affiliation REP Office Sought: House  X Senate President	State TN District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, expension of the Committee of the Commi	etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:
	Corporation Corporation w/o Capital Stock Labor Org	ganization
	Membership Organization Trade Association Cooperati	ve
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	<b>&gt;</b> ).
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1	

J	FEC Form 1 (Revised 0	2/2009)		Page <b>3</b>
٧	Vrite or Type Committee Name  Marsha for Ser	acto		
6.		rganization, Affiliated Committee,	Joint Fundraising Representa	tive, or Leadership PAC Sponsor
	Mailing Address	228 S Washington Street		
		Suite 115		
		Alexandria	VA	
		CITY ▲	STATE	E ▲ ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organizati	on X Joint Fundraising Repre	esentative Leadership PAC Sponso
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number	optional) and position of the p	erson in possession of committee
	Williamson,	Les, , ,		
	Full Name	PO Box 3750		
	Mailing Address			
		Brentwood	TN	37024
		CITY ▲	STATE	E ▲ ZIP CODE ▲
	Title or Position ▼			
	Assistant Treasurer		Telephone number	214 - 676 - 7442
8.	Treasurer: List the name and any designated agent (e.g., a		al) of the treasurer of the comm	nittee; and the name and address of
	Full Name Gant, Ron, of Treasurer	M., ,		
	or reasurer	ıPO Box 3750		
	Mailing Address			
		Brentwood		37024
		CITY ▲	STATE	E ▲ ZIP CODE ▲
	Title or Position ▼			
	Treasurer		Telephone number	615 - 376 - 2324

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Full Name of Designated Agent Mailing Address	Williamson, Les, , ,  PO Box 3750  Brentwood	TN	37024
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Assistant Treasu	urer Telephone r	number	214   -   676   -   7442
	<b>Depositories:</b> List all banks or other depositories in which the commoxes or maintains funds.	nittee deposits	funds, holds accounts, rents
Name of Bank, I	Depository, etc.		
Mailing Address	Bank of America  600 N Washington Street  Alexandria	VA	22314
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, I			
	Chain Bridge Bank, NA		
Mailing Address	1445-A Laughlin Avenue		
	McLean	L VA	22101
	CITY ▲	STATE ▲	ZIP CODE ▲

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). <b>Joint Fundrais</b> i	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected	d Organization, Affiliated Committee, Joint Fundamental Senate Victory	draising Representative	e, or Leadership PAC Spons
Mailing Address	228 S Washington Street		
-	Ste 115		
	Alexandria	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee Joinfy by name, address (phone number – optional)	nt Fundraising Representa	ative Leadership PAC Sp
Connecte sesignated Agent: Identer Full Name		nt Fundraising Representa	ative Leadership PAC Sp
Connect		nt Fundraising Representa	ative Leadership PAC Sp
Connecte sesignated Agent: Identer Full Name		nt Fundraising Representa	Leadership PAC Sp
Connect  resignated Agent: Ident  Full Name  Mailing Address	fy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
Connecte sesignated Agent: Identer Full Name	fy by name, address (phone number – optional)		
resignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which anintains funds.	STATE A Telephone Number	ZIP CODE A
Connect  resignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Fanks or Other Deposite afety deposit boxes or not be boxes or not be boxes.  Jame of Bank, FirstEdepository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which naintains funds.  Sank	STATE A Telephone Number	ZIP CODE A

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5(g) or	r(h). <b>Joint Fundraising</b>	ı Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
_	4.		FEC ID number	C
6.	=	Organization, Affiliated Committee, Joint Fundrais n Victory Committee	ing Representative	e, or Leadership PAC Sponsor
	Darrasso Diackbur			
	Mailing Address	901 N Washington St		
		Suite 700		
		Alexandria	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	ndraising Representa	Leadership PAC Sponsor
8. I	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
	Mailing Address			
		CITY A	STATE A	ZIP CODE <b>A</b>
	Mailing Address  TITLE OR POSITION		STATE A	ZIP CODE A
		<b>Y</b>		ZIP CODE <b>A</b>
!	TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mai	Telep	STATE ▲ hone Number	
!	TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main the same of Bank, Depository, etc.	Telep  ies: List all banks or other depositories in which the ntains funds.	STATE ▲ hone Number	
!	TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mai	Telep  ies: List all banks or other depositories in which the ntains funds.  arshall Bank	STATE ▲ hone Number	
!	TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main the same of Bank, Depository, etc.	ies: List all banks or other depositories in which the ntains funds.  arshall Bank	STATE ▲ hone Number	

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Blackburn Tennessee  Mailing Address  PC	nization, Affiliated Committee, Joint F Victory Fund  D Box 3750  entwood	FEC ID FEC ID FEC ID FEC ID FEC ID	number number number	C C C c, or Leadership PAC Sponse
3. 4. A. Blackburn Tennessee  Mailing Address  Break B	D Box 3750	FEC ID	number	C
4.	D Box 3750	FEC ID	number	C
4.	D Box 3750			
Mailing Address	D Box 3750	undraising Repr	resentative	e, or Leadership PAC Spons
Mailing Address PC	9 Box 3750			
Mailing Address				
Mailing Address				
	entwood			
	entwood		1 1 1	
Relationship:			TN	37024
	CITY A		STATE A	ZIP CODE ▲
Full Name				
Mailing Address				
<u>L</u>				
TITLE OR POSITION ▼	CITY ▲	S	TATE 🛦	ZIP CODE ▲
		Telephone Nu	mber	
Sanks or Other Denositories: I	ist all banks or other depositories in w funds.	hich the committe	ee deposits	s funds, holds accounts, rents
afety deposit boxes or maintains  Jame of Bank, Pinnacle Fi Depository, etc.	nancial  3rd Avenue South			
afety deposit boxes or maintains  Jame of Bank, Pinnacle Fi Depository, etc.  Mailing Address				37201

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5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected Blackburn Victory	Organization, Affiliated Committee, Joint Fundraisi Fund	ing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO Box 3241		
		Brentwood		37024
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee Solution Joint Fur	ndraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telep	hone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ies: List all banks or other depositories in which the intains funds.	committee deposit	s funds, holds accounts, rents
	Depository, etc.			
	Mailing Address	1445 New York Ave NW		<u> </u>
	Mailing Address	4th Floor		
	Mailing Address		DC	20005

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5(g)	or(h). <b>Joint Fundraisin</b> ç	յ Participant:			
	1		FEC	D number	C
	2.		FEC	D number	C
	3.		FEC	D number	C
	4		FEC	D number	C
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint F	undraising Re	epresentative	e, or Leadership PAC Sponsor
	Mailing Address	PO Box 13026			
		Austin	1	TX	78711
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraisi	ng Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number - optional	ul)		
	Mailing Address	1			
	Manning Address				
	TITLE OR POSITION	_ CITY ▲		STATE A	ZIP CODE ▲
	TITLE OR POSITION	<u> </u>	Telephone I	Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.  Mailing Address	ies: List all banks or other depositories in water name of the state o	hich the comm	nittee deposit	s funds, holds accounts, rents
_		CITY A		STATE A	ZIP CODE ▲
4		OH Y		SIMIL	ZIF GODE A

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5(g)	or(h). <b>Joint Fundraising</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	Team McConnell			
	Moiling Address	228 S Washington Street		
	Mailing Address	Suite 115		
				22244
	<b>-</b>	Alexandria	VA	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE <b>A</b>
	Full Name	CITY A  Te  ies: List all banks or other depositories in which	STATE   STATE   lephone Number	
	Full Name  Mailing Address  TITLE OR POSITION   Banks or Other Depositor	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE   STATE   Ilephone Number	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	funds, holds accounts, rents
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	funds, holds accounts, rents
<ol> <li>8.</li> <li>9.</li> </ol>	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	funds, holds accounts, rents